## SENATE SUBSTITUTE FOR HOUSE BILL NO. 4485

A bill to amend 1980 PA 350, entitled "The nonprofit health care corporation reform act," (MCL 550.1101 to 550.1704) by adding section 402c.

## THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 SEC. 402C. (1) IF PARTICIPATION BETWEEN A PRIMARY CARE PHY-
- 2 SICIAN AND A HEALTH CARE CORPORATION TERMINATES, THE PHYSICIAN
- 3 MAY PROVIDE WRITTEN NOTICE OF THIS TERMINATION WITHIN 15 DAYS
- 4 AFTER THE PHYSICIAN BECOMES AWARE OF THE TERMINATION TO EACH
- 5 MEMBER WHO HAS CHOSEN THE PHYSICIAN AS HIS OR HER PRIMARY CARE
- 6 PHYSICIAN. IF A MEMBER IS IN AN ONGOING COURSE OF TREATMENT WITH
- 7 ANY OTHER PHYSICIAN WHO IS PARTICIPATING WITH THE HEALTH CARE
- 8 CORPORATION AND THE PARTICIPATION BETWEEN THE PHYSICIAN AND THE
- 9 HEALTH CARE CORPORATION TERMINATES, THE PHYSICIAN MAY PROVIDE
- 10 WRITTEN NOTICE OF THIS TERMINATION TO THE MEMBER WITHIN 15 DAYS
- 11 AFTER THE PHYSICIAN BECOMES AWARE OF THE TERMINATION. THE

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- 1 NOTICES UNDER THIS SUBSECTION MAY ALSO DESCRIBE THE PROCEDURE FOR
- 2 CONTINUING CARE UNDER SUBSECTIONS (2) AND (3).
- 3 (2) IF PARTICIPATION BETWEEN A MEMBER'S CURRENT PHYSICIAN
- 4 AND A HEALTH CARE CORPORATION TERMINATES, THE HEALTH CARE CORPO-
- 5 RATION SHALL PERMIT THE MEMBER TO CONTINUE AN ONGOING COURSE OF
- 6 TREATMENT WITH THAT PHYSICIAN AS FOLLOWS:
- 7 (A) FOR 90 DAYS FROM THE DATE OF NOTICE TO THE MEMBER BY THE
- 8 PHYSICIAN OF THE PHYSICIAN'S TERMINATION WITH THE HEALTH CARE
- 9 CORPORATION.
- 10 (B) IF THE MEMBER IS IN HER SECOND OR THIRD TRIMESTER OF
- 11 PREGNANCY AT THE TIME OF THE PHYSICIAN'S TERMINATION, THROUGH
- 12 POSTPARTUM CARE DIRECTLY RELATED TO THE PREGNANCY.
- 13 (C) IF THE MEMBER IS DETERMINED TO BE TERMINALLY ILL PRIOR
- 14 TO A PHYSICIAN'S TERMINATION OR KNOWLEDGE OF THE TERMINATION AND
- 15 THE PHYSICIAN WAS TREATING THE TERMINAL ILLNESS BEFORE THE DATE
- 16 OF TERMINATION OR KNOWLEDGE OF THE TERMINATION, FOR THE REMAINDER
- 17 OF THE MEMBER'S LIFE FOR CARE DIRECTLY RELATED TO THE TREATMENT
- 18 OF THE TERMINAL ILLNESS.
- 19 (3) SUBSECTION (2) APPLIES ONLY IF THE PHYSICIAN AGREES TO
- 20 ALL OF THE FOLLOWING:
- 21 (A) TO PARTICIPATE ON A PER CLAIM BASIS AND TO ACCEPT AS
- 22 PAYMENT IN FULL REIMBURSEMENT FROM THE HEALTH CARE CORPORATION AT
- 23 THE RATES APPLICABLE PRIOR TO THE TERMINATION.
- 24 (B) TO ADHERE TO THE HEALTH CARE CORPORATION'S STANDARDS FOR
- 25 MAINTAINING QUALITY HEALTH CARE AND TO PROVIDE TO THE HEALTH CARE
- 26 CORPORATION NECESSARY MEDICAL INFORMATION RELATED TO THE CARE.

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- 1 (C) TO OTHERWISE ADHERE TO THE HEALTH CARE CORPORATION'S
- 2 POLICIES AND PROCEDURES, INCLUDING, BUT NOT LIMITED TO, THOSE
- 3 CONCERNING UTILIZATION REVIEW, REFERRALS, PREAUTHORIZATIONS, AND
- 4 TREATMENT PLANS.
- 5 (4) A HEALTH CARE CORPORATION SHALL PROVIDE WRITTEN NOTICE
- 6 TO EACH PARTICIPATING PHYSICIAN THAT IF PARTICIPATION BETWEEN THE
- 7 PHYSICIAN AND THE HEALTH CARE CORPORATION TERMINATES, THE PHYSI-
- 8 CIAN MAY DO BOTH OF THE FOLLOWING:
- 9 (A) NOTIFY THE HEALTH CARE CORPORATION'S MEMBERS UNDER THE
- 10 CARE OF THE PHYSICIAN OF THE TERMINATION IF THE PHYSICIAN DOES SO
- 11 WITHIN 15 DAYS AFTER THE PHYSICIAN BECOMES AWARE OF THE
- 12 TERMINATION.
- 13 (B) INCLUDE IN THE NOTICE UNDER SUBDIVISION (A) A DESCRIP-
- 14 TION OF THE PROCEDURES FOR CONTINUING CARE UNDER SUBSECTIONS (2)
- **15** AND (3).
- 16 (5) THIS SECTION DOES NOT CREATE AN OBLIGATION FOR A HEALTH
- 17 CARE CORPORATION TO PROVIDE TO A MEMBER COVERAGE BEYOND THE MAXI-
- 18 MUM COVERAGE LIMITS PERMITTED BY THE HEALTH CARE CORPORATION'S
- 19 CERTIFICATE WITH THE MEMBER.
- 20 (6) AS USED IN THIS SECTION:
- 21 (A) "PHYSICIAN" MEANS AN ALLOPATHIC PHYSICIAN OR OSTEOPATHIC
- 22 PHYSICIAN.
- 23 (B) "TERMINAL ILLNESS" MEANS THAT TERM AS DEFINED IN SECTION
- 24 5653 OF THE PUBLIC HEALTH CODE, 1978 PA 368, MCL 333.5653.
- 25 (C) "TERMINATES" OR "TERMINATION" INCLUDES THE NONRENEWAL,
- 26 EXPIRATION, OR ENDING FOR ANY REASON OF A PARTICIPATION AGREEMENT
- 27 BETWEEN A PHYSICIAN AND A HEALTH CARE CORPORATION, BUT DOES NOT

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## HB 4485, As Passed Senate, October 21, 1999

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- 1 INCLUDE A TERMINATION BY THE HEALTH CARE CORPORATION FOR FAILURE
- 2 TO MEET APPLICABLE QUALITY STANDARDS OR FOR FRAUD.
- 3 Enacting section 1. This amendatory act takes effect July
- **4** 1, 2000.